L Number	Hits	Search Text	DB	Time stamp
1	2523	aerosol and heparin	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:46
2	1173	(aerosol and heparin) and pulmonary	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:46
3	202	((aerosol and heparin) and pulmonary) and coagulant	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:47
4	123	(((aerosol and heparin) and pulmonary) and coagulant) and surgery	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:47
5	99	((((aerosol and heparin) and pulmonary) and coagulant) and surgery) and cancer	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:47
6	94	(((((aerosol and heparin) and pulmonary) and coagulant) and surgery) and cancer) and atherosclerosis	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:48
7	53	(((((aerosol and heparin) and pulmonary) and coagulant) and surgery) and cancer) and glycosaminoglycan	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:49
8	1	((((((aerosol and heparin) and pulmonary) and coagulant) and surgery) and cancer) and glycosaminoglycan) and chondroitin	USPAT; US-PGPUB; EPO; JPO; DERWENT; IBM_TDB	2002/11/07 10:49

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metastasis, pl .metastases

1. The shifting of a disease or its local manifestations, from one part of the body to another, as in mumps when the symptoms referable to the parotid gland subside and the testis becomes affected. **2.** The spread of a disease process from one part of the body to another, as in the appearance of neoplasms in parts of the body remote from the site of the primary tumor; results from dissemination of tumor cells by the lymphatics or blood vessels or by direct extension through serous cavities or subarachnoid or other spaces. **3.** Transportation of bacteria from one part of the body to another, through the bloodstream (hematogenous *m.*) or through lymph channels (lymphogenous *m.*). SYN: secondaries (1) . [G. a removing, fr. *meta,* in the midst of, + *stasis,* a placing] **biochemical *m.*** the transportation and induction of abnormal immunochemical specificities in apparently normal organs. **calcareous *m.*** the deposit of calcareous material in remote tissues in the event of extensive resorption of osseous tissue in caries, malignant neoplasms, and so on. **hematogenous *m.*** metastasis. **in-transit *m.*** in melanoma, a metastatic deposit occurring in the lymphatic pathway between the primary tumor and its draining lymph nodes. **lymphogenous *m.*** metastasis. **pulsating metastases** metastases to bone, usually from hypernephromas, but occasionally from thyroid tumors; considerablee vascularity may have expansile pulsation and a continuous bruit. **satellite *m.*** *m.* within the immediate vicinity of a primary malignant neoplasm; e.g., skin adjacent to a melanoma.

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atherosclerosis

Arteriosclerosis characterized by irregularly distributed lipid deposits in the intima of large and medium-sized arteries, causing narrowing of arterial lumens and proceeding eventually to fibrosis and calcification; lesions are usually focal and progress slowly and intermittently. Limitation of blood flow accounts for most clinical manifestations, which vary with the distribution and severity of lesions. In lower animals, *a.* of swine and fowl closely resemble human *a.*. SYN: nodular *sclerosis*. [G. ath?r?, gruel, + sclerosis] Atherosclerosis, the most common form of arteriosclerosis, is a complex process that begins with the appearance of cholesterol-laden macrophages (foam cells) in the intima of an artery. Smooth muscle cells respond to the presence of lipid by proliferating, under the influence of platelet factors. A plaque forms at the site, consisting of smooth muscle cells, leukocytes, and further deposition of lipid; in time the plaque becomes fibrotic and may calcify. Expansion of an atherosclerotic plaque leads to gradually increasing obstruction of the artery and ischemia of tissues supplied by it. Ulceration, thrombosis, or embolization of a plaque, or intimal hemorrhage and dissection, can cause more acute and severe impairment of blood flow, with the risk of infarction. These are the principal mechanisms of coronary artery disease (arteriosclerotic heart disease with or without heart failure, angina pectoris, myocardial infarction), peripheral vascular disease (particularly occlusive disease of the lower extremity causing intermittent claudication or gangrene), and stroke (cerebral infarction due to occlusion of carotid or intracranial arteries). Independent risk factors for atherosclerosis are male sex, advancing age, the postmenopausal state, a family history of atherosclerosis, cigarette smoking, hypertension, diabetes mellitus, elevated plasma LDL cholesterol, elevated plasma homocysteine, overweight, and a sedentary life-style. Mounting evidence suggests that elevation of plasma levels of triglycerides, fasting insulin, fibrinogen, apolipoproteins A and B, and lipoprotein (a) are also independent risk factors. The diagnosis of atherosclerosis is usually based on history and physical examination and confirmed by angiography, Doppler ultrasonography, and other imaging techniques. Treatment is largely mechanical: balloon stretching, laser ablation, or surgical removal of plaques, and various bypass and grafting procedures. The prevention of atherosclerosis is a major objective of modern medicine. Preventive measures include regular vigorous exercise, a diet low in fat and cholesterol, maintenance of a healthful weight, avoidance of tobacco, and use of pharmacologic agents as indicated (e.g., rigorous control of hypertension and diabetes mellitus, reduction of elevated cholesterol, estrogen replacement therapy after menopause). See free radical; low-fat diet.